

2006 READY Camp Application:

SCHOOL NAME AND DISTRICT
ADDRESS
ADVISOR NAMEADVISOR TITLEADVISOR BIRTHDATE
CONTACT PHONE NUMBER:
EMAIL:
CAMPER #1 NAME SEX ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
EMERGENCY CONTACT PHONE NUMBER T-SHIRT SIZE: Small medium large XL XXL
CAMPER #2 NAME SEX

ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
EMERGENCY CONTACT PHONE NUMBER T-SHIRT SIZE: □ small □ medium □ large □ XL □ XXL
CAMPER #3 NAME BIRTHDATE SEX ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
EMERGENCY CONTACT PHONE NUMBER
CAMPER #4 NAME SEX SEX ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
EMERGENCY CONTACT PHONE NUMBER T-SHIRT SIZE: Small
CAMPER #5 NAME SEX ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
EMERGENCY CONTACT PHONE NUMBER T-SHIRT SIZE: □ small □ medium □ large □ XL □ XXL

CAMPER #6 NAME
CAMPER #6 NAME SEX
ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
EMEDICENCY CONTACT
EMERGENCY CONTACTPHONE NUMBER
T-SHIRT SIZE:
small medium large XL XXL
CAMPED #7 NAME
CAMPER #7 NAME SEX
ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
ALLENGIES/NESTNICTIONS ON SI ECIAL NEEDS:
EMERGENCY CONTACT
PHONE NUMBER
T-SHIRT SIZE:
☐ small ☐ medium ☐ large ☐ XL ☐ XXL
CAMPER #8 NAME
CAMPER #8 NAME SEX
ALLERGIES/RESTRICTIONS OR SPECIAL NEEDS?
EMERGENCY CONTACT
PHONE NUMBER
T-SHIRT SIZE:
☐ small ☐ medium ☐ large ☐ XL ☐ XXL

Please e-mail, mail, or fax the application to:

Molly Kisting

Center for Emergency Health & Safety in Schools

One Foundation Circle

Waunakee, WI 53597

Molly.kisting@cehss.org

Fax: (608) 592-3072 Phone: (608) 592-5200

*The READY Camp is of no cost to you or your team by the support of the Office of Justice Assistance, Homeland Security Program and Citizen Corps Initiatives. All birthdates are required for security reasons at Volk Field and Camp Douglas.